

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
 Bayfield County
 Planning and Zoning Depart.
 PO Box 58
 Washburn, WI 54891
 (715) 373-6138

Memo

Colt \$7500

APPLICATION FOR PERMIT
 BAYFIELD COUNTY, WISCONSIN
 Date Stamp (Received)
 JUN 03 2015
 Bayfield Co. Zoning Dept.

ENTERED

Permit #:	15-0170
Date:	10-5-15
Amount Paid:	\$175
Refund:	10-5-15

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED → LAND USE SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER

Owner's Name: **RYAN FREDERICKS** Mailing Address: **P.O. Box 57** City/State/Zip: **Drummond, WI 54932** Telephone: **715-739-6238**

Address of Property: **1365 Brady Road** City/State/Zip: **Drummond, WI 54932** Cell Phone: **111-580-0896**

Contractor: **None** Contractor Phone: **Plumber:** Plumber Phone: **Plumber:** Written Authorization Attached Yes No

Authorized Agent: (Person Signing Application on behalf of Owner(s)) Agent Phone: **Agent Mailing Address (include City/State/Zip):**

PROJECT LOCATION: Legal Description: (Use Tax Statement) **1/4, 1/4 Gov't Lot 2 Lot(s) 3 CSM 851 Vol & Page 1/3P. Lot(s) No. Block(s) No. Subdivision:** **5000** Recorded Document: (i.e. Property Ownership) **Volume . 910 Page(s) . 740**

Section **31**, Township **44N** N. Range **07** W Town of: **DRUMMOND** Lot Size: **4.510** Acreage

Shoreland Non-Shoreland

Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? If Yes---continue → Distance Structure is from Shoreline: _____ feet

Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue → Distance Structure is from Shoreline: _____ feet

Is Property in Floodplain Zone? Yes No

Are Wetlands Present? Yes No

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
\$ 300	<input type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary Specify Type: _____ <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: Grav' <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it) Length: **12** Width: **30** Height: **360**

Proposed Construction: Length: _____ Width: _____ Height: _____

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.) with Loft with a Porch with (2 nd) Deck with a Deck with (2 nd) Deck with Attached Garage	(X) (X) (X) (X) (X) (X) (X) (X)	
<input type="checkbox"/> Commercial Use	Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	(X)	
<input type="checkbox"/> Municipal Use	Mobile Home (manufactured date)	(X)	
	Addition/Alteration (specify) Patio DECK	(12 X 30)	360
	Accessory Building (specify)	(X)	
	Accessory Building Addition/Alteration (specify)	(X)	
	Special Use: (explain)	(X)	
	Conditional Use: (explain)	(X)	
	Other: (explain)	(X)	

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES. I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at all reasonable times for the purpose of inspection.

Owner(s): **Ryan Fredericks** Date **5-25-15**
 (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

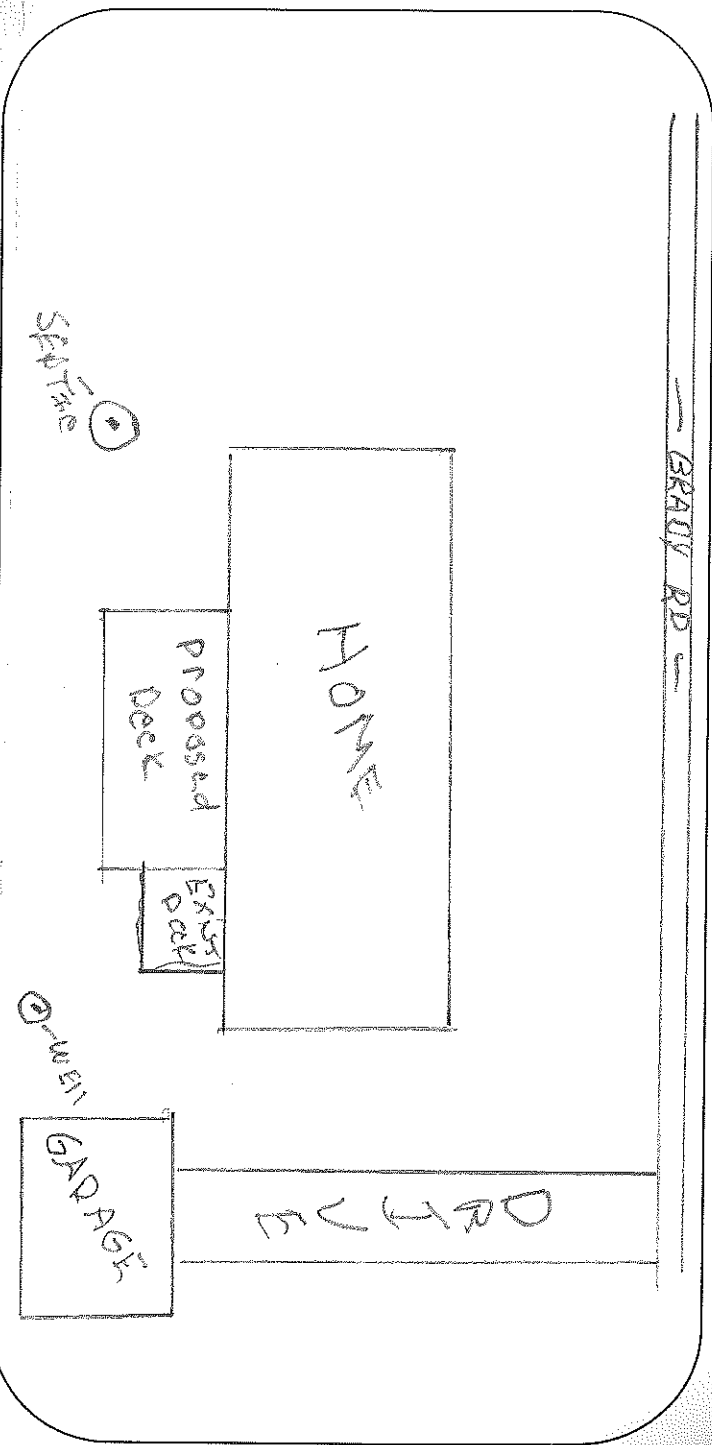
Authorized Agent: _____ Date _____
 (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit **1365 Brady Road, Drummond, WI 54832** Attach Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Box below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
- (2) Show / Indicate: **North (N) on Plot Plan**
- (3) Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
- (4) Show: **All Existing Structures on your Property**
- (5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
- (6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
- (7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	100 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	N/A Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	93 Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	450 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	229 Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Setback from the East Lot Line	130 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	18 Feet	Setback to Well	34 Feet
Setback to Drain Field	35 Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits (Flow w/bs)

Issuance Information (County Use Only)

Sanitary Number: 321463 # of bedrooms: 3 Sanitary Date: 1999

Reason for Denial:

Permit #: 15-0170 Permit Date: 6-5-15

Is Parcel a Sub-Standard Lot Yes No (Deed of Record) Yes No

Is Parcel in Common Ownership Yes No (Fused/contiguous Lot(s)) Yes No

Is Structure Non-Conforming Yes No

Granted by Variance (B.O.A.) Yes No Case #: _____

Previously Granted by Variance (B.O.A.) Yes No Case #: _____

Was Parcel Legally Created Yes No

Was Proposed Building Site Delineated Yes No

Inspection Record:

Date of Inspection: 6/4/15 Inspected by: _____

Condition(s) Town, Committee or Board Conditions Attached? Yes No (If No they need to be attached.)

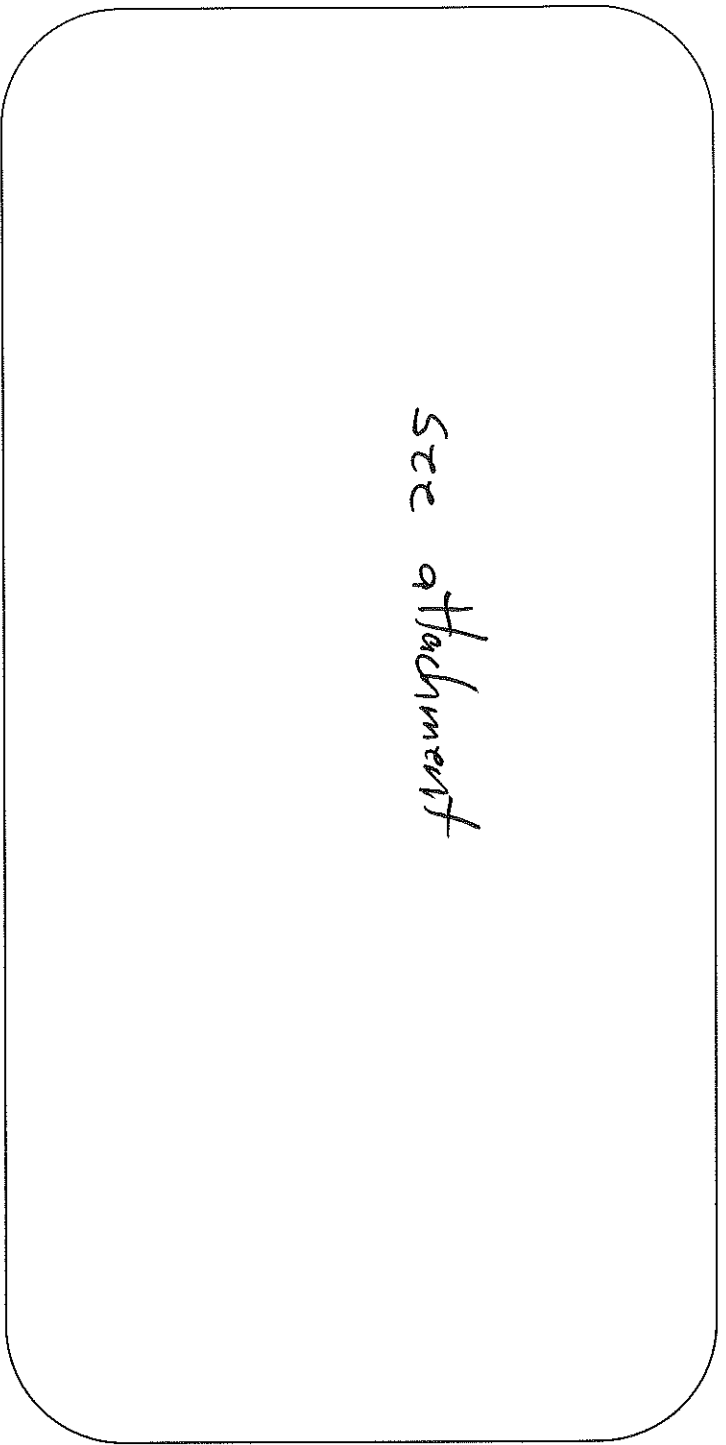
Signature of Inspector: *S. G. Carby* Date of Approval: 6/3/15

Hold For Sanitary: _____ Hold For TBA: _____ Hold For Affidavit: _____ Hold For Fees: _____

Below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See Attachment



Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

- (8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	190'	Setback from the Lake (ordinary high-water mark)	75'
Setback from the Established Right-of-Way	165'	Setback from the River, Stream, Creek	NA
Setback from the North Lot Line	70' NA	Setback from the Bank or Bluff	NA
Setback from the South Lot Line	NA	Setback from Wetland	NA
Setback from the West Lot Line	200'	20% Slope Area on property	X Yes <input type="checkbox"/> No
Setback from the East Lot Line	60'	Elevation of Floodplain	NA
Setback to Septic Tank or Holding Tank	N	Setback to Well	Feet
Setback to Drain Field	Feet		Feet
Setback to Privy (Portable, Composting)	Feet		Feet

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

- (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
 For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
 The local Town, Village, City, State or Federal agencies may also require permits.

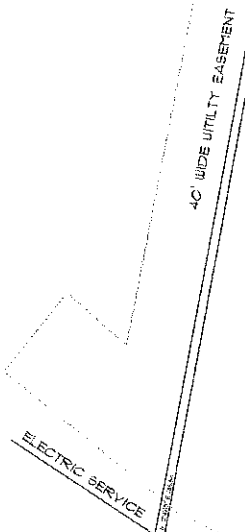
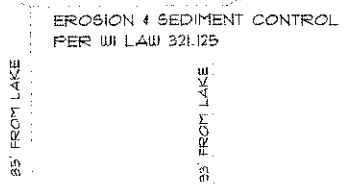
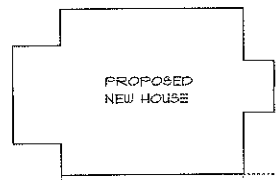
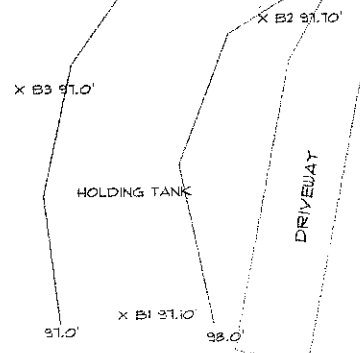
Issuance Information (County Use Only)		Sanitary Number:	15-525	# of bedrooms:	4	Sanitary Date:	5-20-15	
Permit Denied (Date):		Reason for Denial:						
Permit #: 15-0175		Permit Date: 6-5-15						
Is Parcel a Sub-Standard Lot	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Structure Contiguous lot(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Granted by Variance (B.O.A.)		Case #:		Previously Granted by Variance (B.O.A.)		Case #:		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Was Parcel Legally Created		X Yes <input type="checkbox"/> No		Were Property Lines Represented by Owner		X Yes <input type="checkbox"/> No		
Was Proposed Building Site Delineated		X Yes <input type="checkbox"/> No		Was Property Surveyed		X Yes <input type="checkbox"/> No		
Inspection Report: Well Staked. Metals all soft metals		Inspected by: M. Furdal		Zoning District: (R-1)		Lakes Classification: (2)		
Date of Inspection: 4-24-15		Inspected by: M. Furdal		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No they need to be attached.)								
Signature of Inspector: Michael Furdal		Date of Approval: 4-27-15						
Hold For Sanitary: <input checked="" type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>					

Sho (1)
Sho (2)
Sho (3)
Sho (7)
Sho (7)



ESOX RD - CISCO LAKE SUMMER HOME ROAD

MARCUS & REGINA MAGNUSON
15395 ESOX RD.
LOT 13 & PART OF 14
74,300 SQ.FT.
1.71 AC.
NOT TO SCALE



CISCO LAKE

LAKE 84.0'